

FORM 6 (ND/SD Miss. DEC. 2011)

**UNITED STATES DISTRICT COURT
Northern DISTRICT OF MISSISSIPPI**

True the Vote, Donna Knezevich, Joseph
Knezevich, Elaine Vechorik, Roy Nicholson, Jane
Coln, Doris Lee, Mark Patrick, Julie Patrick, Paul
Patrick, Sybil Tribble, Chad Higdon, Jennifer
Higdon and David Philley

Plaintiffs

v.

CIVIL ACTION

No. 3:14cv-144-MPM-SAA

The Honorable Delbert Hosemann, in his official
capacity as Secretary of State for the State of
Mississippi, The Republican Party of Mississippi

Defendant

AMENDED APPLICATION FOR ADMISSION PRO HAC VICE

(A) Name: Joseph M. Nixon

Firm Name: Beirne, Maynard & Parsons, LLP

1300 Post Oak Blvd, Ste 2500

Office Address:

City: Houston State TX Zip 77056

Telephone: 713-623-0887 Fax: 713-960-1527

E-Mail: jnixon@bmpllp.com

(B) Client(s): Plaintiffs, True the Vote, et al

c/o Joseph Nixon

Address: Beirne, Maynard & Parsons, LLP

City: Houston State TX Zip 77056

Telephone: 713-623-0887 Fax: 713-960-1527

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The following information is optional:

Has Applicant had a prior or continuing representation in other matters of one or more of the clients Applicant proposes to represent and is there a relationship between those other matter(s) and the proceeding for which Applicant seeks admission?

The applicant represents True the Vote in other, unrelated matters in Texas.

Does Applicant have any special experience, expertise, or other factor that Applicant believes makes it particularly desirable that Applicant be permitted to represent the client(s) Applicant proposes to represent in this case?

The applicant practices in the areas of voting and election issues.

(C) Applicant is admitted to practice in the:

<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>

State of Texas (Admitted 11/82 - Bar No. 15244800)
District of Columbia

and is currently in good standing with that Court. A certificate to that effect, issued within ninety days of the date of this Application, is enclosed; the physical address, telephone number and website/email address for that admitting Court are:

State Bar of Texas

Membership Department

P. O. Box 12487

Austin, TX 78711

Telephone: (800) 204-2222, ext. 1383

Website/Email: www.texasbar.com/ Email: memmail@texasbar.com

All other courts before which Applicant has been admitted to practice:

Jurisdiction	Period of Admission
Northern District of Texas	01/25/2007
Eastern District of Texas	06/13/1986
Southern District of Texas	07/11/1983
Western District of Texas	04/06/1987
District of Columbia	09/10/2010
4th Circuit Court of Appeals	01/11/2012
5th Circuit Court of Appeals	10/11/1983
US Supreme Court	02/24/1986

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- | | Yes | No |
|--|--------------------------|-------------------------------------|
| (D) Has Applicant been denied admission pro hac vice in this state? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Has Applicant had admission pro hac vice revoked in this state? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Has Applicant been formally disciplined or sanctioned by any court in this state in the last five years? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If the answer was "yes," describe, as to each such proceeding, the nature of the allegations, the name of the person or authority bringing such proceedings; the dates the proceedings were initiated and finally concluded; the style of the proceedings; and the findings made and actions taken in connection with those proceedings:

- | | Yes | No |
|---|--------------------------|-------------------------------------|
| (E) Has any formal, written disciplinary proceeding ever been brought against Applicant by a disciplinary authority in any other jurisdiction within the last five years? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If the answer was "yes," describe, as to each such proceeding, the nature of the allegations; the name of the person or authority bringing such proceedings; the date the proceedings were initiated and finally concluded; the style of the proceedings; and the findings made and actions taken in connection with those proceedings.

- | | Yes | No |
|---|--------------------------|-------------------------------------|
| (F) Has Applicant been formally held in contempt or otherwise sanctioned by any court in a written order in the last five years for disobeying its rules or orders? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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If the answer was "yes," describe, as to each such order, the nature of the allegations, the name of the court before which such proceedings were conducted; the date of the contempt order or sanction, the caption of the proceedings, and the substances of the court's rulings (a copy of the written order or transcript of the oral rulings must be attached to the application).

- (G) Please identify each proceeding in which Applicant has filed an application to proceed pro hac vice in this state within the preceding two years, as follows:

Name and Address of Court	Date of Application	Outcome of Application
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None - Not Applicable

- (H) Please identify each case in which Applicant has appeared as counsel pro hac vice in this state within the immediately preceding twelve months, is presently appearing as counsel pro hac vice, or has pending applications for admission to appear pro hac vice, as follows:

Name and Address of Court	Style of Case
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None - Not Applicable

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	Yes	No
(I) Has Applicant read and become familiar with all of the LOCAL UNIFORM CIVIL RULES OF THE UNITED STATES DISTRICT COURTS FOR THE NORTHERN AND SOUTHERN DISTRICTS OF MISSISSIPPI?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Has Applicant read and become familiar with the MISSISSIPPI RULES OF PROFESSIONAL CONDUCT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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(J) Please provide the following information about the resident attorney who has been associated for this case:

Name and Bar No: L. Eades Hogue Mississippi State Bar No. 2498
Louisiana State Bar No. 1960

Firm Name: Beirne, Maynard & Parsons, LLP

Office Address: Pan-American Life Center
601 Poydras Street, Suite 2200

City: New Orleans

State: LA Zip 70130

Telephone: (504) 586-1241

Fax: (504) 584-9142

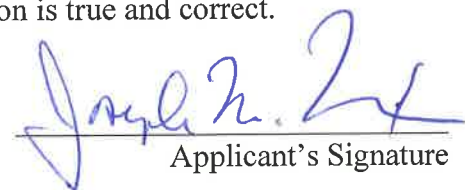
E-Mail: ehogue@bmpllp.com

(K) The undersigned resident attorney certifies that he/she agrees to the association with Applicant in this matter and to the appearance as attorney of record with Applicant.

/s/ L. Eades Hogue
Resident Attorney

I certify that the information provided in this Application is true and correct.

July 7, 2014
Date


Applicant's Signature

Unless exempted by Local Rule 83.1(d)(5), the application fee established by this Court must be enclosed with this Application.

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CERTIFICATE OF SERVICE

The undersigned Applicant certifies that a copy of this Application for Admission Pro Hac Vice has been mailed or otherwise served on this date on all parties who have appeared in this case.

This the 7th day of July, 2014.


Applicant